

NATIONAL NON-DOMESTIC RATES.

Name: Property Number:
Address: Reference:
Date:

Dear Sir/Madam,

LOCAL GOVERNMENT FINANCE ACT 1988 APPLICATION FOR RATE RELIEF RE:

SPORTS/RECREATION ORGANISATIONS.

Please complete in BLOCK CAPITALS and return to the above address.

1. APPLICANT'S NAME:
ADDRESS

2. RATEPAYER'S NAME:

3. THE RATEPAYER IS:
(Please circle only one of the alternatives)

- i) A registered charity YES/ NO
If YES, please state the registration number:

(Registered charities: please omit Section 4 but ensure you sign the declaration overleaf).

- ii) A registered CASC (Community Amateur Sports Club) YES/ NO
If YES, please state the registration number:

(Registered CASC's: please omit Section 4 but ensure you sign the declaration overleaf).

- iii) A "not for profit" organisation (but not a registered charity) YES/ NO

- iv) Other type of organisation (but not a registered charity) YES/ NO
If YES, please explain the nature of your organisation:

4. PLEASE ANSWER THE FOLLOWING IF **NOT** A REGISTERED CHARITY.
(Circle the appropriate answer to each of the nine questions).

1	Is the membership open to all sections of the community?	Yes No	10% 0%
2	What percentage of club members are Teignbridge residents?	75 - 100% 50 - 74% 0 - 49%	10% 5% 0%
3	Is the club/organisation affiliated to a County/National Governing Body of Sport? If yes, please name the governing body:	Yes No	10% 0%
4	Has the club/organisation an adopted constitution? (If this is your first application, please supply a copy).	Yes No	10% 0%
5	Are the facilities made available to groups other than members?	Regularly Occasionally Never	10% 5% 0%
6	Does the club have a current sports development plan? (If yes, please provide a copy)	Yes No	10% 0%
7	Does the club have a training and development programme for coaches? (If yes, please provide a copy)	Yes No	10% 0%
8	Is the club/organisation committed to working with the district Council to enhance sport and recreational opportunities?	Yes No	10% 0%
9	Do the premises include a bar facility? If Yes: Is the bar incidental to the financing of the club?	No Yes No	20% 10% 0%
	Total Percentage		
	For office use only Assessed by: Input by:	Date	

DECLARATION:

I hereby certify that the particulars given above are correct to the best of my knowledge and belief, and understand that any relevant records which may be required to substantiate the validity of this and future applications will be maintained.

NAME:

CAPACITY:

TELEPHONE NO:

SIGNATURE:

DATED:

Please Note: The information you have given on this form will be put onto a computer system registered under the 1998 Data Protection Act.